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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
with Initial
Filing
OR
☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Att mey Docket Number PUS-H002-001
First Named Inventor Frédéric FORTIN et al.

COMPLETE IF KNOWN

Application Number Pending: cont of PCT/FR02/02547
Filing Date 07/17/2002
Art Unit Pending
Examiner Name Pending

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLEXIBLE VERTEBRAL LINKING DEVICE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
FR01/09628	France	07/18/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/S&H 1 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number **35,246** OR ☐ Correspondence address below

John Moetteli of MOETTEL & ASSOCIES SàRL

Name

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CH - 1211 Geneva 12

City

State

ZIP

Switzerland
Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the files so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name Frédéric
(first and middle (if any))Family Name FORTIN
or SurnameInventor's
Signature

Date

Pessac

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FRANCE

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FR

Citizenship

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City

State

33600

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Country

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name Johann
(first and middle (if any))Family Name ROBIN
or SurnameInventor's
Signature

Date

Mérignac

Residence: City

State

FRANCE

Country

FR

Citizenship

Mailing Address 1, allée du Puits de Maran

Bègles

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State

33100

ZIP

FRANCE

Country

☐ Additional inventors are being named on the ——— supplemental Additional Inventor(s) sheet(s) PTO/S&H 02A attached hereto.

[Page 2 of 2]

PTO/SB/01 (09-03)
Approved for use through 11/30/2003, OMB 0551-0035
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	Pending; cont of PCT/EP02/
	Filing Date	07/17/2002 02547
	First Named Inventor	PORTIN et al.
	Title	Flexible vertebral linking
	Art Unit	Pending device
	Examiner Name	Pending
Attorney Docket Number	PUS-8002-001	

I hereby appoint:

☒ Practitioners associated with the Customer Number: 35,246

OR

☐ Practitioner(s) named below:

Name	Registration Number
John MOETTELI	35,289
Sherman PERIA	34,404

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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
<input type="checkbox"/> Firm or Individual Name	John Moetiteli of MOETTELI & Associés SARL		
Address	Ave de Frontenex 6		
Address	Case Postale 486		
City	CH - 1211 Geneva 12	State	Zip
Country	SWITZERLAND		
Telephone	00141227477849	Fax	00141223477887

I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/05)

SIGNATURE of Applicant or Assignee of Record

Name	PORTIN, Frédéric		
Signature	X 		
Date	01/16/2004	Telephone	0033556369929

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, file below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a patent by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND PETS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	Pending; cont of PCT/FR02/
Filing Date	07/17/2002 02547
First Named Inventor	FORTIN et al.
Title	Flexible vertebral linking
Art Unit	Pending device
Examiner Name	Pending
Attorney Docket Number	PUS-H002-001

I hereby appoint:

☒ Practitioners associated with the Customer Number:

35,246

OR

☐ Practitioner(s) named below:

Name	Registration Number
John MOETTELI	35,289
Sherman PERNIA	34,404

or, my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ The address associated with Customer Number:

35,246

OR

☐ Firm or Individual Name John Moetteli of MOETTELI & Associés SARL

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I am the:

☐ Applicant/Investor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/S&H)

SIGNATURE of Applicant or Assignee of Record

Name	ROBIN, Johann
Signature	X
Date	01/16/2004
Telephone	05 56 85 26 18

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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